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APPLICANTS

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**** CONTINUING DATA *******

This application is a CON of 09/960,624 09/21/2001 ABN YES *Pf*.

**** FOREIGN APPLICATIONS *******

GERMANY 100 47 033.5 09/22/2000 YES *Pf*
GERMANY 101 43 865.6 09/07/2001 YES *Pf*

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** 02/17/2004

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY GERMANY	SHEETS DRAWING 1	TOTAL CLAIMS 11	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>Pf</i>				
Verified and Acknowledged Examiner's Signature <i>Pf</i> Initials				

ADDRESS

24972

TITLE

Basal finger joint implant

FILING FEE RECEIVED 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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